HEALTH AFFAIRS

THE ASSISTANT SECRETARY OF DEFENSE

1200 DEFENSE PENTAGON WASHINGTON, DC 20301-1200

APR 0 7 2004

The Honorable Duncan Hunter Chairman, Committee on Armed Services U.S. House of Representatives Washington, DC 20515-6035

Dear Mr. Chairman:

This letter provides a first interim report under section 734 of the National Defense Authorization Act for Fiscal Year 2002 (P.L. 107-107) which authorizes the Secretary of Defense and the Secretary of Veterans Affairs (VA) to jointly carry out a pilot program under which the Secretary of Veterans Affairs may perform the physical examinations required for separating members of the uniformed services who are in one or more geographic areas designated for the pilot program by the Secretaries. The DiLorenzo TRICARE Health Clinic, Pentagon, was initially chosen as the pilot site because it presented a unique opportunity to link a web-based physical exam and medical history application (Electronic Physical Exam TriService system (ePETS)) with the VA on line application and integrate it with automated tools to support the VA's examination protocols. Such a successful union would have allowed for the interchange of electronic claims and medical data. Unfortunately, the ePETS application was not compliant with the Defense Information Technology Security Certification and Accreditation Process. Efforts to make it compliant have been unsuccessful to date. Consequently, the pilot project at the DiLorenzo TRICARE Health Clinic, Pentagon, as originally envisioned, has been terminated and the pilot will be transitioning to a VA/Department of Defense Benefits Delivery at Discharge Program (BDD).

BDD programs are up and running at 136 locations, providing information and tools to achieve a seamless transition from military to veteran status. Several of these sites are involved in piloting the single separation physical examination. Expanding and exporting the successful BDD programs already operational at several of these sites has now become the focus of this pilot. Gathering information and compiling lessons learned for the purpose of this interim report is taking longer than anticipated. I expect that the data collection will be complete and a joint interim report will be forwarded to you no later than June, 2004.

I trust you will find this reply informative and helpful. Thank you for your continued interest in and support of the Military Health System.

William Winkenwerder, Jr., MD

cc:

Representative Ike Skelton